



CITY OF LOS ANGELES APPLICATION FOR ENDORSEMENT

Agency/Organization Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Contact Number: _____ Email: _____

Pursuant to the provisions of Section 44.15 of the Los Angeles Municipal Code, this agency/organization is applying to be designated as an **ENDORSED AGENCY** by the Los Angeles Police Commission.

The governing body of this agency hereby requests Endorsed Agency status, and voluntarily submits to investigation by the Charitable Services Section to establish that this agency meets the requirements specified in the Los Angeles Municipal Code, Section 44.15(a) (1) through (9).

The governing body of this agency further CERTIFIES that the agency fulfills the following:

1. Has been registered with Charitable Services Section for a period of at least one calendar year.
2. Provides a direct service program to the community.
3. That the work for which the agency was created has been performed.
4. That the Board of Directors or Trustees exercise full control and direction of the agency.
5. That the members of the Board of Directors or trustees are not compensated for their services.
6. That the compensated administrative head of the agency is not a member of the Board of Directors or Trustees.
7. That no monies of the agency are on loan directly or indirectly to any officer, director, trustee or employee.
8. That the agency's fund-raising expenses do not exceed 20 percent.
9. That the agency has not spent funds on any program other than those for which the funds were donated.
10. That the agency keeps its records in accordance with generally accepted accounting principles and standards for nonprofit agencies.
11. That the agency has not violated any applicable law.

This application for endorsement is a voluntary act of the governing body of the agency and the statements made here and in other materials submitted with this application are true and correct to the best of the signatories' knowledge.

_____ Organization Officer - Signature	_____ Print or Type Name	_____ Date
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_____ Organization Officer -Signature	_____ Print or Type Name	_____ Date
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